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ABSTRACT

Project REAL was designed to address Goal 1 of the Educate America Act. Four major components were: (1) the identification of pregnant and/or parenting teens; (2) the enrollment of those identified into parental services, life skills and parenting classes; (3) weekly visits in the home to provide assistance with developmentally appropriate needs for the infant/toddler and assistance concerning available child care services which would enable the mother to continue her education; and (4) involvement of the parent from pregnancy and beyond in the welfare of the child through the provision of proper nutrition, health care, and developmental needs to help ensure that the child entering school is ready to learn. Initially 16 unwed girls in their teens who had a baby or were expecting enrolled in Project REAL. Initially, most of the participants recognized the physical, mental, social and emotional needs of a baby for which a mother must care. At completion, all participants recognized their responsibility for caring for their baby for all of these needs. Also at completion, the participants exhibited a much better understanding of the type of environment needed by their baby. They also realized the importance of reading to their baby, starting at a very young age. (JBJ)

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**PERCEPTIONS OF PREGNANT TEENS AND TEEN MOTHERS
ENTERING A TRAINING PROGRAM ON PARENTING
SKILLS AND KNOWLEDGE ABOUT INFANTS**

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**Perceptions of Pregnant Teens and Teen Mothers Entering a Training
Program on Parenting Skills and Knowledge About Infants**

In our Delta society, we are faced with the dilemma of children having children. Although it is the desire of the "parent child" for the offspring to grow and develop for successful entry into the world of learning -- the school setting, without guidance and direction the "parent child" does not have the resources or knowledge to provide these essentials for appropriate development. A Delta high school principal stated, "These teen mothers are a forgotten group. We are presently doing nothing to prepare them for this most important role of being a parent." It is for these children, the "parent child" and the "child" that the project described in this report was implemented.

Background

A number of projects with comparable objectives to the one described here have been reported. A project implemented in a rural Georgia school district combined similar components: parent involvement, parenting skills, literacy, vocational-career preparation, and other early intervention strategies (Ripple, 1994). Another focused on involving teen mothers in learning about the value of reading to their own children (Doneson, 1991). A project implemented in a similar setting provided child care for the infants and toddlers and preschool children of teen mothers who were in the process of obtaining their high school diplomas (Forrest City Public Schools, 1991). In addition to child care, components on nutrition, health

and social services were provided to the children. The children in the program benefitted from improved developmental skills and readiness for the school environment.

Another parallel project, "Preparing Girls to Care for Self and Family Project," was incorporated in a Kentucky city school system (Owensboro Public Schools, 1989). The goal was to produce more capable single mothers who would be more likely to finish their education and join the labor force. An assessment of priority attitudes showed an average gain of 1.8 levels of a possible five levels on a career awareness instrument. Specific parenting skills improved 66.8% as a result of participation in this project.

Program

Project REAL, "Reaching Early Aids Learning," began as a grant project funded by the Arkansas Department of Education under a program designed to help ensure the accomplishment of Goals 2000. Project REAL was designed to address Goal 1 of the Educate America Act. There were four major components:

1. The identification of pregnant and/or parenting teens.
2. The enrollment of those identified into parental services, life skills and parenting classes.
3. Weekly visits in the home to provide assistance with developmentally appropriate needs for the infant/toddler and assistance concerning available child care services which would enable the mother to continue her education.
4. Involvement of the parent from pregnancy and beyond in the welfare of the child through the provision of proper nutrition, health care, and developmental needs to help ensure that the child entering school is ready to learn.

Project REAL was implemented in a rural, Mississippi-delta public school district in northeastern Arkansas. The Delta area is characterized by poverty, low educational attainment skills, poor health and nutrition, a high teen pregnancy rate, low birth weight, and high infant mortality. In the county, 35.5% of children live in poverty. In school, the free and reduced lunch rate is 59% of the total population.

Collaboration

A university faculty member in early childhood was employed to assist with the project. The consultant provided training for the project staff and also worked directly with the teen mothers and mothers-to-be. Contacts were made with local agencies and service providers to provide participants with exposure to local service agendas, including high schools, Department of Health and Human Services, migrant cooperatives, mission food banks, and the educational services cooperative.

Participants

Initially, 16 unwed girls in their teens who had a baby or were expecting enrolled in Project REAL. At program's start, eight of the girls were expecting and ten were caring for a baby at home. (Two of the teen mothers were expecting their second child.) They ranged in age from 15 to 19 years; 13 were black, three white. All but one lived with their family (some with mother only) except one who lived with her boyfriend's family. Over a six-month period, three girls moved or dropped out of the program and seven others joined. At this point, three have graduated from high school and most hope to continue their education. All but two have remained in high school.

When attending group meetings at the center, the young mothers brought their babies. These infants appeared appropriately dressed, well-kept and clean. While in the room, the babies were the center of attraction of the young mothers, other program participants and the program staff.

Results

At the beginning of the program and again six months later, program staff individually interviewed their assigned program participant (generally in their home). These discussions centered around 61 questionnaire items which were developed consistent with the program objectives. In general, the results of the pre and post assessments were as follows.

Initially, most of the participants recognized the physical, mental, social and emotional needs of a baby that a mother must care for. At completion, all participants recognized their responsibility for caring for their baby for all of these needs.

At completion, the participants exhibited a much better understanding of the type of environment needed by their baby. They also realized the importance of reading to their baby, starting at a very young age.

Although all the young mothers and mothers-to-be said they would allow their babies to watch TV, the total number of hours per day deemed appropriate fell from an average of 3.5 hours in the pre-assessment to 2.2 hours in the post-assessment.

In contrast to the pre-assessment of their knowledge and awareness of social and educational services available, the participants were much more knowledgeable in the post-assessment. They also were more knowledgeable about their responsibility in being their child's first teacher and the need to involve family members in their baby's life.

Finally, in the post-assessment program participants exhibited a much better understanding of the elements of a good diet for their baby. Along with their understanding of a well-balanced meal, the young mothers and mothers-to-be were more cognizant of low-salt, low-fat meals and snacks, giving numerous examples of nutritious foods for infants as well as those which are high sodium and high fat.

Overall, a characteristic identified at the beginning of the program as well as later was the recognition of the need for these young mothers and mothers-to-be to be good mothers for their child to be happy and positive.

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